Copy to S.F.

Form 9-331
(May 1963)

ITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN T   ICATE*
(Other instruc
verse side)   on re-

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 029395 - b

SUNDRY NOTICES AND REPORTS ON WELLS
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1.
OIL WELL ☐   GAS WELL ☐   OTHER   Water Injection Well

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR
ATLANTIC RICHFIELD COMPANY

8. FARM OR LEASE NAME
Turner "B" (B)

3. ADDRESS OF OPERATOR
P. O. Box 1920, Hobbs, New Mexico 88240

9. WELL NO.
47

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

560' fr North line and 1980' fr East line

10. FIELD AND POOL, OR WILDCAT
Grayburg Jackson

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
29-T17S-R31E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3707' GR

12. COUNTY OR PARISH
Eddy

13. STATE
New Mexico

16.
Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) ___ Converted to WIW ___

REPAIRING WELL ☐

ALTERING CASING

ABANDONMENT* [X]

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

3-11-69 Ran 2-3/8"CD EUE tubing w/Tension Packer set @ 3181'. Preparing to inject water into Premier perfs. 3243-3270' Russell-Turner Waterflood Area.

18. I hereby certify that the foregoing is true and correct

SIGNED _____   TITLE ___ Superintendent ___   DATE ___ March 13, 1969 ___

(This space for Federal or State office use)

APPROVED BY _____   TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
MAR 17
R. L. BEEKMA

Orig&4cc: USGS, Artesia   *See Instructions on Reverse Side
    cc: Southern Region (West Texas)
    cc: file